

MONTHLY FILING GPAC REPORT: PURPOSE AND TOTALS

FORM MPAC
COVER SHEET PG 2

12 COMMITTEE NAME Austin Apartment Association	13 Filer ID (Ethics Commission Filers) 00090447
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14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported
		B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported
		B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	

15 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) <input type="checkbox"/> check here if this report qualifies for the higher itemization threshold	\$ 0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 2,143.00
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$10 OR LESS, UNLESS ITEMIZED	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 0.00
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 111,728.20
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00

16 AFFIDAVIT

I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

Emily Blair

Signature of Campaign Treasurer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said _____, this the _____ day of _____, 20_____, to certify which, witness my hand and seal of office.

Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath

SUBTOTALS - MPAC**FORM MPAC**
COVER SHEET PG 3
3 of 8

17 COMMITTEE NAME Austin Apartment Association		18 Filer ID (Ethics Commission Filers) 00090447
19 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 2,143.00
2.	<input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 0.00
3.	<input checked="" type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$ 0.00
4.	<input type="checkbox"/> SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
5.	<input type="checkbox"/> SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
6.	<input type="checkbox"/> SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	\$
7.	<input type="checkbox"/> SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	\$
8.	<input type="checkbox"/> SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
9.	<input checked="" type="checkbox"/> SCHEDULE E: LOANS	\$ 0.00
10.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 0.00
11.	<input checked="" type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$ 0.00
12.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
13.	<input checked="" type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$ 0.00
14.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
15.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/3 Rpt: 4/8
2 FILER NAME Austin Apartment Association		3 Filer ID (Ethics Commission Filers) 00090447
4 Date 05/25/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blaskowsky, Kelly	7 Amount of Contribution (\$) \$99.00
	6 Contributor address; City; State; Zip Code 450 Torrington Austin, TX 78737	
8 Principal occupation / Job title (See Instructions) Property Manager		9 Employer (See Instructions) Capstone Management
Date 04/30/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ebner, Theresa	Amount of Contribution (\$) \$300.00
	Contributor address; City; State; Zip Code 809 Charleston Blvd Smithville, TX 78957	
Principal occupation / Job title (See Instructions) Property Supervisor/DM		Employer (See Instructions) LDG Development
Date 04/30/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eckhardt, Sandy	Amount of Contribution (\$) \$300.00
	Contributor address; City; State; Zip Code 809 Charleston Blvd. Taylor, TX 76574	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) None
Date 05/25/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Faulkner, Kimbery	Amount of Contribution (\$) \$150.00
	Contributor address; City; State; Zip Code 2220 Park Place Circle Round Rock, TX 78681	
Principal occupation / Job title (See Instructions) Property Manager		Employer (See Instructions) Greystar
Date 05/25/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harmon, Ryan	Amount of Contribution (\$) \$99.00
	Contributor address; City; State; Zip Code 131 Belle Dr. Wimberly, TX 78676	
Principal occupation / Job title (See Instructions) Project Manager		Employer (See Instructions) Camp Construction

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/3 Rpt: 5/8
2 FILER NAME Austin Apartment Association		3 Filer ID (Ethics Commission Filers) 00090447
4 Date 04/27/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mickler, Shay	7 Amount of Contribution (\$) \$99.00
6 Contributor address; City; State; Zip Code 1001 Sedalia Street Cedar Park, TX 78713		
8 Principal occupation / Job title (See Instructions) Branch Manager		9 Employer (See Instructions) The Liberty Group
Date 05/25/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Naylor, Stephanie	Amount of Contribution (\$) \$150.00
Contributor address; City; State; Zip Code 9100 Cessna Lane Austin, TX 78717		
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Flooring Warehouse
Date 05/25/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Needham, Teri	Amount of Contribution (\$) \$300.00
Contributor address; City; State; Zip Code 12521 Belcara Place Austin, TX 78732		
Principal occupation / Job title (See Instructions) Operations Manager		Employer (See Instructions) PS Landscapes
Date 04/27/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pruden, Ashley	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code 2550 Grey Falls Drive #450 Houston, TX 77077		
Principal occupation / Job title (See Instructions) Project Manager		Employer (See Instructions) Apartment Data
Date 04/27/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Riley, Robyn	Amount of Contribution (\$) \$99.00
Contributor address; City; State; Zip Code 18309 Lura Lane Jonestown, TX 78645		
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) Valor Fire Protection

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/3 Rpt: 6/8
2 FILER NAME Austin Apartment Association		3 Filer ID (Ethics Commission Filers) 00090447
4 Date 05/25/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sanchez, Christy	7 Amount of Contribution (\$) \$150.00
	6 Contributor address; City; State; Zip Code 11227 West Cave Blvd Dripping Springs, TX 78620	
8 Principal occupation / Job title (See Instructions) Regional Manager		9 Employer (See Instructions) Bainbridge Properties
Date 04/27/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scott, Haydee	Amount of Contribution (\$) \$99.00
	Contributor address; City; State; Zip Code 8905 Spurflower Cove Austin, TX 78759	
Principal occupation / Job title (See Instructions) Business Development Manager		Employer (See Instructions) BG Multifamily
Date 05/25/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Slappy-Scott, Tracy	Amount of Contribution (\$) \$99.00
	Contributor address; City; State; Zip Code 5608 Gorham Glen Ln Austin, TX 78739	
Principal occupation / Job title (See Instructions) Regional VP		Employer (See Instructions) Cardinal Group
Date 05/07/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thomas, Carrie	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code 177 Mount Ord Lane Dripping Springs, TX 78620	
Principal occupation / Job title (See Instructions) Sales Manager		Employer (See Instructions) Rasa Floors
Date 05/25/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Watson, Katya	Amount of Contribution (\$) \$99.00
	Contributor address; City; State; Zip Code 2007 Hoffman Cedar Park, TX 78613	
Principal occupation / Job title (See Instructions) Regional Supervisor		Employer (See Instructions) CREA Management

PLEGGED CONTRIBUTIONS

SCHEDULE B

The Instruction Guide explains how to complete this form.

1 Total pages Schedule B:
Sch: 1/1 Rpt: 7/8

2 FILER NAME
Austin Apartment Association

3 Filer ID (Ethics Commission Filers)
00090447

4 TOTAL OF UNITEMIZED PLEDGES

\$ 0.00

5 Date

6 Full name of pledgor out-of-state PAC (ID#: _____)

8 Amount of
pledge (\$)

9 In-kind description
(If applicable)

7 Pledgor Address; City; State; Zip Code

Check if travel outside of Texas. Complete Schedule T.

10 Principal occupation / Job title (See Instructions)

11 Employer (See Instructions)

LOANS

SCHEDULE E

The Instruction Guide explains how to complete this form.		1 Total pages Schedule E: Sch: 1/1 Rpt: 8/8
2 FILER NAME Austin Apartment Association		3 Filer ID (Ethics Commission Filers) 00090447
4 TOTAL OF UNITEMIZED LOANS		\$ 0.00
5 Date of loan	7 Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____)	9 Loan Amount (\$)
6 Is lender a financial institution?	8 Lender address; City; State; Zip Code	10 Interest Rate
		11 Maturity Date
12 Principal occupation / Job title (See Instructions)		13 Employer (See Instructions)
14 Description of Collateral <input type="checkbox"/> None		15 Check if personal funds were deposited into political account (See Instructions) <input type="checkbox"/>
16 GUARANTOR INFORMATION <input type="checkbox"/> not applicable	17 Name of guarantor	19 Amount Guaranteed (\$)
	18 Guarantor address; City; State; Zip Code	
20 Principal occupation		21 Employer (See Instructions)